

<b>CLAIMS ONLY</b>							SERIAL NO. <div style="font-family: cursive; font-size: 1.2em;">10580937</div>	FILING DATE					
							APPLICANT(S)						
<b>CLAIMS</b>													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓	1	↓	1	↓	TOTAL IND.	↓	↓	↓	↓	↓	↓
TOTAL DEP.	13	↓	16	↓	16	↓	TOTAL DEP.	↓	↓	↓	↓	↓	↓
TOTAL CLAIMS	14	↓	17	↓	17	↓	TOTAL CLAIMS	↓	↓	↓	↓	↓	↓

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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